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ABSTRACT

This booklet, suitable for intermediate grade and junior high school students, concerns drug education and development of decision-making skills regarding drug use. Following an introduction, material is divided into four parts. Part 1, a glossary, defines such basic vocabulary as addiction, overdose, withdrawal, and dependence, and differentiates between narcotics, depressants, stimulants, hallucinogens, and inhalants. Part 2 discusses various drugs, including alcohol, marijuana, speed, cocaine, hallucinogens, and narcotics. The derivations of these drugs and their physical and mental effects are discussed. Parts 3 and 4 focus on why people take drugs and factors the individual should consider when faced with the opportunity to take drugs. (LP)

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DRUGS AND ALCOHOL

A HANDBOOK FOR YOUNG PEOPLE

by Jim Parker

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YOU...

You're a busy person.

You go to school, watch television, study (probably not as much as you should), listen to music, go to movies, and hang out with your friends. You might play racquetball or play the guitar, collect stamps or Star Wars souvenirs. Someday, you want to be a nurse, an astronaut, a fashion model or a big league baseball player. Or maybe you're not sure *what* you want to be. But what you are *right now* is busy. You do your homework and do the dishes. You make your bed and maybe mow the lawn. So why should you spend time learning about drugs?

There's a lot of reasons.

You're at the age now when you've begun to find out for yourself about the world. You're beginning to make decisions for yourself. And one of the most important decisions you'll ever have to make is whether or not to try drugs.

No one sets out to become a drug addict or an alcoholic. No kid ever woke up one morning and decided he wanted to have a drug problem when he grew up. But millions of people are alcoholics. Millions of people have problems with drugs.

Why?

All too often, it is because people don't *know* early enough what they're getting into. They don't have the information they need to make intelligent choices. Maybe they don't know how drugs and alcohol work in the body. Or maybe they don't realize that if you do A, B and C often enough, that D probably will follow. Whatever the reason, they didn't have enough information to make a wise choice.

We believe that the more you really know about drugs, the less you'll probably want to try them.

But regardless of what you decide about drugs, we think it's your right to know about how they work and how they affect the body.

Another reason to learn about drugs is because, whether you try drugs or not, other people *will* try them. Kids at school, your friends, or your brother or sister might decide to take drugs someday (or maybe they already *do* take drugs), and it can be a good thing to know something about them.

Sometimes people have bad reactions to different drugs, even overdose and die, because no one around them knew enough to offer the right help at the right time. For this reason, knowing about drugs is like knowing first aid. You might be able to change someone's life if you know what to do in a crisis.

See? There really *are* a lot of reasons to learn about drugs.

What we're going to be doing in the rest of this book is to talk about drugs, what they are and how they work.

We'll talk about why people take drugs and who those people are. We'll talk about the effects of drugs and the problems they can cause.

We think it's important that you get a chance to learn how drugs work and why people take them. And we think for you to have a decent chance at making an intelligent decision about drugs you need facts about drugs and their effects. Real facts, not horror stories and scare tactics.

We're not going to tell you a lot of made-up stories about drugs.

We don't want to trick you into making the "right" decision by lying. What we are going to do is tell you facts about drugs we've learned from personal experience, from working in drug crisis centers and treatment programs, and from scientific research. We think the truth speaks louder than any lie ever invented.

We'll give you the honest truth about drugs, and trust you to make the right decision for yourself.

Deal?

But first, a word about ...

WORDS

In other words ...

There are some basic terms that you need to understand before we can say much about drugs at all. These words will apply, in one way or another, to all the drugs we'll talk about in this booklet. In fact, the first word we need to define is *drug* itself.

Drug. A drug is a chemical which produces a change in the way a person thinks or feels. Drugs can be pills, potions, or powders — animal, vegetable, or mineral. However, to qualify as a drug, the substance should not be a food. Thus, although sugar changes the way a person thinks and feels, it isn't a drug. It's a food. Alcohol, on the other hand, is a drug because, even though some people take it instead of food, it isn't nutritive.

Tolerance. Tolerance to a drug occurs when the body learns to tolerate the presence of a particular chemical. As tolerance develops, users have to use more and more of the drug to achieve the same effects.

Dependence. Dependence refers to a physical or psychological need for a drug in a person who has used that drug for a long time. A person who is *physically dependent* on a drug will become ill when the drug is withdrawn. A *psychologically* dependent person will suffer boredom, restlessness, depression, or nervousness when the drug is withdrawn.

Different drugs produce different degrees of dependence. Some, like heroin and alcohol, produce very high physical dependence in users. Others, like tranquilizers and speed, produce strong psychological dependence.

Addiction. Addiction is a state of physical and psychological dependence on a drug. A person who is addicted to drugs is called an *addict*.

Withdrawal. When a drug-dependent or addicted person stops taking drugs, this process is called *withdrawal.* Withdrawal symptoms are usually similar, no matter which drugs are involved. Nausea, vomiting, chills, and nervousness are the most common symptoms of withdrawal. The process of physical withdrawal can last from a few days to a week. The process of getting together psychologically after drug addiction can take much longer, even months or years.

Overdose. When a person takes more than the recommended amount of a prescribed drug, or more than a safe amount of a street drug, they have *overdosed.* Overdoses of different drugs can cause serious problems in users. In fact, death can result from drug overdose.

Intoxication. Being high on a drug. There are a *lot* of words to describe states of intoxication — loaded, stoned, ripped, wasted, and blotto come to mind quickly. Feelings involved in intoxicated states vary from drug to drug. Some people are just addicted to being high — it doesn't matter which drugs are involved. These people are said to be addicted to *states of intoxication.*

Trip. A lot of different drug experiences are called trips, but

the most common is the LSD (or other hallucinogenic drug) trip. An LSD trip usually lasts from six to eight hours. A good trip is usually pleasurable, but a bad trip can be terrifying.

Flashback. Some drugs, especially hallucinogens like LSD, can cause severe panic attacks in users. Although most often these panic reactions go away with time, sometimes they happen again when the person is stressed or tired. These reactions are called *flashbacks.* A flashback is terrifying because the person seems to slip back into the scariest part of a bad trip.

Types of Drugs

Some of the words for different types of drugs are real tongue-twisters, but don't let long words stop you from learning. You don't have to learn how to spell them, just know what they mean.

Basically, five types of drugs are abused. We'll quickly review these categories so that we all start from the same place in learning about their effects.

Narcotics. Some people think that all illegal drugs are called narcotics. Actually, only a specific type of drug is a true narcotic. The word narcotics comes from the Greek word *narcos* which means sleep. Narcotic drugs produce sleep and relieve pain.

Depressants. Narcotics are similar in a lot of ways to depressant drugs. Depressants produce sleep and relieve tension in users. They are often called downers, because they slow the mind and body down.

Stimulants. Stimulant drugs are usually called "speed" by users. They speed up the body by speeding up the central nervous system. They usually reduce hunger and make a person feel less tired.

Hallucinogens. Hallucinogenic drugs produce hallucinations. Hallucinations are voices or visions or feelings that users hear or see or feel that aren't there. This effect can be mild, as in the case of marijuana, or severe, as in the case of PCP.

Inhalants. There are a lot of chemicals that produce intoxication when inhaled or sniffed. These chemicals produce effects that are similar to alcohol, but are much more dangerous.

And now a word from our sponsor...

Now that you know some of the words we're going to be using and the main types of drugs we'll be talking about, we're going to have a short two-question quiz. The purpose of the quiz is to find out what you already know and how you feel about drugs *right now.*

Take a few minutes and think about the questions carefully. Then check the bottom of the page for the correct answers.

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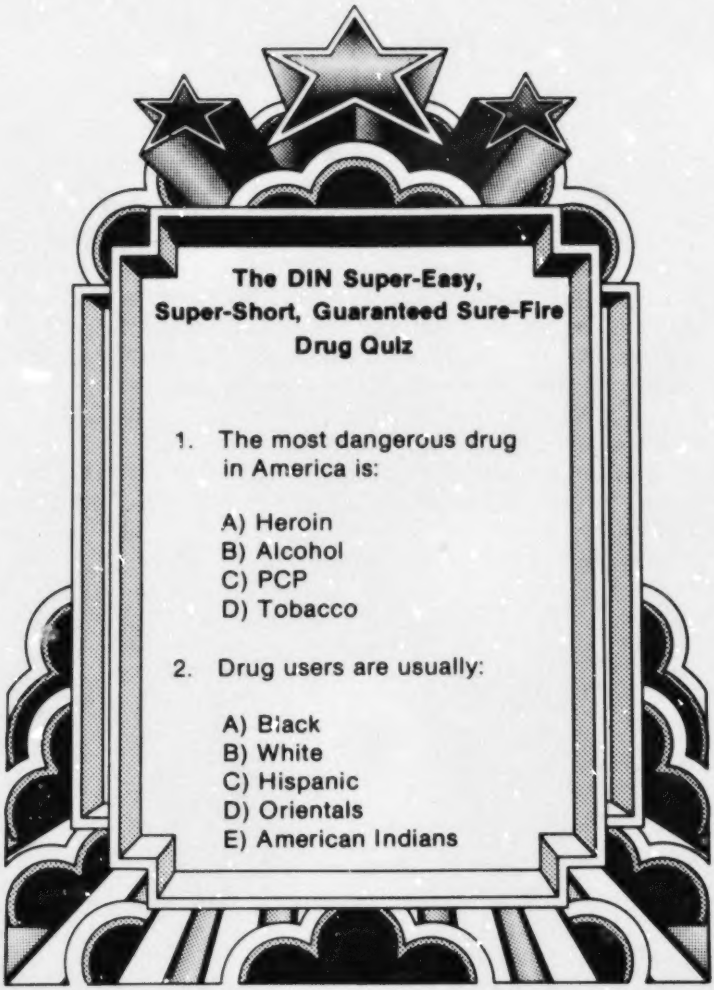


The DIN Super-Easy, Super-Short, Guaranteed Sure-Fire Drug Quiz

1. The most dangerous drug in America is:

   A) Heroin
   B) Alcohol
   C) PCP
   D) Tobacco

2. Drug users are usually:

   A) Black
   B) White
   C) Hispanic
   D) Orientals
   E) American Indians

This is a funny kind of quiz, because all the answers are correct. All the drugs listed in question 1 are dangerous, and each is "the most dangerous drug in America" if it causes problems for you or someone you care about. Same with question 2. In fact, the best answer to number 2 would probably be just a simple "yes."

It would be nice if all your tests in school were that easy, wouldn't it? Well, maybe if you asked your teacher ...

No, probably not.

Anyway, the point of the quiz is that we all have a certain amount of knowledge (and a certain amount of misinformation and prejudice) when it comes to talking about drugs. It also shows how we have to work to understand even basic ideas. A simple question like the first one becomes very complicated. What does "most dangerous drug in America" mean, after all? Are cigarettes "most dangerous" because millions of people die every year from lung cancer and emphysema and heart disease caused by smoking? Or is heroin "most dangerous" because it's so easy to overdose and die with it? Is alcohol "most dangerous" because of the tens of millions of Americans with alcohol problems? Or is PCP "most dangerous" because of the serious psychological problems it causes?

The point is that all these drugs are dangerous. And the best way to insure that they're not dangerous to you is to get some information about them.

Why not turn the page and start right now?

DRUGS

Now that you've passed the DIN Super-Easy, Super-Short, Guaranteed Sure-Fire Drug Quiz, we're ready to move into our discussion on drugs and their effects. We'll talk about all of the types of drugs we've mentioned so far and a few others that sort of fall into cracks between the major drug categories.

The first drug we're going to talk about is an "invisible" drug that affects more people than any other drug. It's called alcohol.

Alcohol

The biggest "drug problem" of all in America, in terms of people affected and lives disrupted, is one that a lot of people forget about. It's alcohol.

More than 10 million people in the United States alone are alcoholics.

Probably at least another 10 million Americans have drinking problems. But mention the phrase "drug problem" to

most people and they forget all about the tens of millions of people with alcohol problems. All they can usually think of are shadowy pictures of addicts in a tenement somewhere. That's probably because people think drug addicts are different. They're black or Puerto Rican or Chicano or punks or *something*. Alcoholics aren't different. They're like everybody else. And they're all around.

Alcoholic? Who's an alcoholic?

An alcoholic is a person who is addicted to alcohol. If an alcoholic does not get a steady supply of alcohol, he gets sick — deathly sick. Alcoholics going through withdrawal not only feel terrible, but also imagine the most horrible things. They might imagine that bugs are crawling on their skin or that monsters are trying to get them — or something worse. Think about that. And remember there are 10 million people in this country who are alcoholics. That's a lot of bugs. And a lot of monsters.

Most people have an image of alcoholics as old skid row bums, but that's not necessarily true. Actually, most alcoholics hold regular jobs and have families and do the sorts of things that other people do. As long as it involves drinking. A lot of drinking.

Choose your poison

Alcohol is an interesting drug because it's a poison in the body. The active ingredient in all the different types of alcohol is called *ethanol*. At moderate doses — one or two drinks, say — alcohol usually works like a tranquilizer. The user becomes more relaxed, confident and talkative. But at heavier doses alcohol has severe depressant effects — like the sleeping pills we'll talk about later. But unlike those other drugs, users have to take a *lot* of alcohol to get drunk. And a lot of alcohol is a lot of poison, which makes the hangover the next day such an

unpleasant experience. Because the brain and the stomach and the other organs of the body are a little (or a lot) sick from the poisoning they were subjected to the night before.

Because alcohol is a poison, it's possible to overdose and even die on it, like any other poison. One of the reasons for the terrible withdrawal symptoms that alcoholics go through is the built-up poisonous effects on the body and the brain from long-time alcohol use.

Alcohol is eliminated from the body by the liver. Filtering alcohol out of the bloodstream is slow work, and the liver is only able to get rid of about an ounce an hour. That means if a person drinks more than that, he'll eventually get drunk.

How much proof do you need?

Alcohol potency is usually measured according to *proof*. The formula for figuring alcohol proof is two proof equals one percent. In other words, 86 proof whiskey is 43 percent pure alcohol. 190 proof grain alcohol is 95 percent pure.

Another simple alcohol formula is that one shot of liquor is approximately equal in strength and effect to one beer or one glass of wine. The absolute alcohol level is about the same.

Not everyone who drinks is an alcoholic or a problem drinker. But everyone who drinks is a *potential* problem drinker. And given the number of people who drink in our society (some estimates are that 90 *million* people — almost 50 percent of our population — drink at least part of the time) it's probably a good idea to think seriously about alcohol and begin to recognize it as the powerful drug that it is.

People joke about drinking and laugh about drunks, but the reality isn't funny at all.

Earlier, we called alcohol an "invisible" drug. We called it that because you can't see it when you drink it, and most people don't even see it as a drug at all. And for that reason, the "invisible" drug in one way just might be the most dangerous drug of all.

Downers

The effects of alcohol are similar to the effects of the next group of drugs we are going to talk about. "Downers" is the common name for the entire group of depressant drugs. They're called downers because they ... slow ... you ... down.

Basically, there are two types of downer drugs — sleeping pills and tranquilizers. There are a lot of different kinds of sleeping pills, and a lot of different kinds of tranquilizers, but all downer drugs fall into one category or the other. Another name for downers is *sedative-hypnotics. Sedative* means that the drugs sedate, or calm, users. *Hypnotic* means that they produce sleep. The calm and sleep produced by these drugs is not the same as natural relaxation or normal sleep, though.

Tranquilizers

Tranquilizers work on different sites in the brain and central nervous system and produce their effects by overriding normal feelings. That means that when a doctor prescribes tranquilizers to a nervous or worried patient, the tranquilizers don't remove the cause of the worry or cure a disease in the person's nerves. What they do is make the *symptoms* of nervousness or sleeplessness or other problems go away for a while.

Popular tranquilizers include drugs like Valium®, Librium®, Tranxene®, and Miltown®. In fact, Valium® is used so much that it's the most popular prescription drug in America. It's even more popular than penicillin or birth control pills.

Sleeping pills

Sleeping pills are similar to tranquilizers. They turn on the sleep centers in the brain and the person falls asleep. The danger with sleeping pills, like the danger with tranquilizers, is that it's easy for a person taking these drugs to think that

they're medicine, curing a disease, rather than simply being drugs that hide symptoms of a problem.

Another danger of these drugs is that people keep on taking them for long periods of time, and gradually they forget how to relax or fall asleep on their own. Then their original problems get worse, because they reach the point where they're stressed or tired all the time.

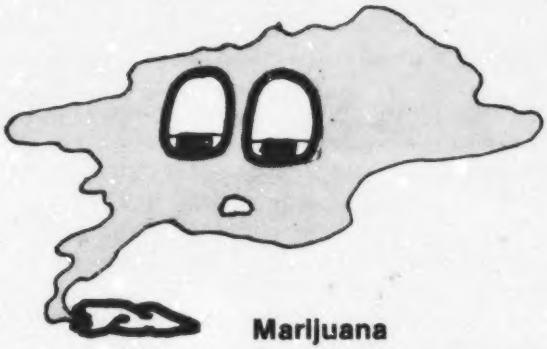
Basically, two kinds of sleeping pills are used today: barbiturates and everything else. Although barbiturates were very popular and widely prescribed in the 1950s and 1960s, they are less often used today. There are two main reasons for the decreased use of barbiturates. One is that doctors have begun to recognize that these drugs are addictive, and produce severe physical and psychological dependence. The other reason is that they are easy for users to overdose on and die, especially when taken with alcohol. Examples of popular barbiturates include Seconal®, Tuinal®, and Nembutal®. Slang names for these drugs are reds, rainbows, and yellow jackets.

Other sleeping pills were developed as a result of the dangers of barbiturates. Unfortunately, many of these drugs have also been shown to be as dangerous and addicting as barbiturates. Widely-used non-barbiturate sleeping pills are Mequin©, (formerly called Quaalude©), Placidyl©, and Dalmane©. These drugs are all highly addictive, and produce a number of serious effects.

The effects of downers are similar to the effects of alcohol. Users' speech becomes slurred and incoherent. Body movement becomes clumsy and uncoordinated. Ordinary inhibitions drain away. In fact, probably the best indication that a person is on downers is that they look and act drunk, but don't smell like they've been drinking.

Downers are especially dangerous when used with alcohol. The reason for this is that both drugs are removed from the body by the liver. When both alcohol and downers are in the bloodstream at the same time, the liver filters out the alcohol first. The downers are not filtered out as quickly as they should be, and can be reabsorbed in the intestine, which prolongs their effect.

The combination effect between alcohol and downers is called *potentiation*. This means that together the drugs are more potent than either would be alone. A rule of thumb regarding potentiation is that the effects of downer drugs are *tripled* when the drugs are taken with alcohol.



Marijuana

Marijuana is the most popular illegal drug in America. It is used regularly by over 16 million Americans. It consists of the crushed leaves and stems of the hemp plant, *cannabis sativa,* which has been cultivated around the world for thousands of years and is used in making rope.

Marijuana has many nicknames — pot, grass, reefer, weed, and a lot of others. And, although it's been around for a long time, new forms of marijuana are being grown now that are much stronger than marijuana has been in the past.

The active ingredient in marijuana is a chemical called tetrahydrocannabinol, or THC. Some of the new forms of marijuana contain much more THC than ordinary marijuana.

One high-THC type of marijuana is called *sinsemilla.* Sinsemilla is a Spanish word that means "seedless." Sinsemilla marijuana doesn't have seeds because the grower interrupts the growth cycle of the plant before seeds form. When this happens, the THC content of the leaves remains very high because the THC doesn't have to go towards making seeds as it normally would. The THC content in ordinary marijuana is about one percent. THC content in sinsemilla can be as high as seven percent.

In the 1960s, when use of marijuana became widespread in America, many marijuana users felt that the drug was entirely harmless. But recent studies have shown that marijuana is a very powerful drug which produces a number of serious effects.

One danger of marijuana is its effects on the lungs of users. Since marijuana smoke is usually held in the lungs longer by users than other kinds of smoke, it irritates the delicate tissue of the lungs. Today, it is known that marijuana smoke can cause lung cancer, the same as tobacco smoke.

Marijuana also affects the way we think and feel in a number of different ways. Some of these changes cause people not to care about things that used to be important to them.

This may turn out to be the most serious effect of marijuana of all. Many people lose interest in their goals and plans for the future when they're on marijuana. They just stay high. They become spectators in their own lives, and just watch opportunities go by as if they were watching a show on television. When a person is high on marijuana they don't have to *do* anything to feel good, which is okay — while they're high. But when they come down, they have the same problems as before — and then some, because they haven't been doing anything to make them go away.

Marijuana is like a trap — a soft, fuzzy, funny kind of trap — to people who use it all the time. And even though it's soft and funny and usually feels good, it's still a trap if you can't get out.

Speed

Speed is the slang name for stimulants, a general class of drugs that tend to speed up the body and the central nervous system. Because speed usually makes users less tired and hungry, it has been popular for years among people who want to lose weight the easy way or generally push their bodies further and faster than they want to go.

Amphetamines are the most popular form of speed. A few years ago, these drugs were widely prescribed by doctors as diet pills. In fact, they were so popular in 1971 that 2 billion diet pills were produced in the United States. That amounted to 10 diet pills for every man, woman and child in the whole country.

Besides reducing appetite, amphetamines make users feel very alert and strong and intelligent. They also let users go without sleep for long periods of time. People on amphetamines just don't feel tired.

But doctors gradually began to realize that amphetamines were not the perfect diet pill. The pills would stop a person's appetite for a while, but hunger would eventually come back, sometimes stronger than before. The other effects also caused other problems.

And so, use of amphetamines as diet pills began to fall off. In 1980, in fact, only 2 million prescriptions for amphetamines were written by doctors. That's less than one prescription for every 100 people.

But a whole new category of speed began to appear as amphetamines became more and more rare. Drugs made to look like amphetamines started turning up all over the country.

The ingredients in these "lookalike" drugs aren't controlled substances at all, but legal non-prescription stimulants, like caffeine. But just because the "lookalike" drugs are legal doesn't mean they're safe. In fact, several people have died in the past few months as a result of taking this "legal" speed.

The most common ingredient in street speed today is caffeine. In fact, caffeine is the most widely used stimulant in America, and the world, today. It is found in coffee and colas and chocolate, and it's used as an ingredient in many medicines.

Caffeine has a stimulating effect on the whole central nervous system. It makes the heart beat faster, and causes blood pressure to rise. People take caffeine (or drink or eat caffeine) because it makes them feel less tired and less hungry.

The other ingredients in "lookalikes" have effects similar to caffeine. The most common of these ingredients are ephedrine and phenylpropanolamine (You don't have to even *try* to pronounce the last one. Just call it PPA.). These two drugs are usually found in a lot of medicines you can buy without a prescription, like diet pills and antihistamines and asthma medicines.

All of these drugs have effects that are similar to the amphetamines. They increase heart beat and blood pressure, and decrease appetite and the need for sleep. These effects can cause serious problems for users. Rapid increases in blood pressure can be very dangerous, and even cause strokes (hemorrhages inside the brain) in users. People who take lots of speed for a long time also don't eat properly and can have serious nutritional deficiencies as a result. Psychological problems caused by long-term speed use can a so be severe and prolonged.

Cocaine

Cocaine is one of the most expensive drugs of all. One ounce of cocaine can cost as much as $2,000.00, depending on its purity. The high price of cocaine is probably one reason for its popularity. People assume that anything that expensive must be good. But if you've read this far, you've probably already figured out that not everything people believe is necessarily true.

Cocaine is derived from the South American coca shrub. Coca was widely used in 19th century patent medicines and other products. One of the most famous products involving coca was Coca-Cola, which contained small amounts of the drug until it was replaced by caffeine in 1908.

Like caffeine and amphetamines, cocaine is a stimulant. Basic stimulant effects of cocaine include reduced appetite, increased alertness, and increased heart rate. The effects of cocaine only last a short time, usually less than an hour.

Cocaine is sold as a white powder, and is usually snorted or injected by users. In the last few years, another way of using cocaine has become popular. Known as "freebase," this type of cocaine is much stronger than ordinary cocaine. Freebase cocaine is smoked through special pipes and produces a very intense high that lasts only two or three minutes. And at $3,000.00 an ounce, those are pretty expensive minutes.

Hallucinogens

Hallucinogens are drugs that produce hallucinations. There are many different hallucinogens, but the two most famous

ones are LSD and PCP. These are also the two most dangerous.

LSD is one of the more interesting drugs in the world. It causes a dazzling parade of visual and auditory special effects, which is one main reason for its continuing popularity.

LSD is also one of the most powerful drugs in the world. A psychoactive dose can be as little as 30 micrograms (one-thirty thousandth of a gram), which can produce a range of perceptual changes.

The common name for LSD is "acid" because its complete name, lysergic acid diethylamide, is just too long to bother with. It's sold in many different forms — as tablets or pellets (usually called "microdot") or blotted onto small squares of paper or gelatin chips (known as "blotter" and "windowpane").

There are other hallucinogenic drugs that are similar in many ways to LSD. Psilocybin and mescaline are two of the more popular ones. Psilocybin is a type of mushroom and mescaline comes from the peyote cactus.

Besides these two drugs, there is an alphabet soup of other hallucinogenic chemicals including MDA, DMT, MMDA, DOM and PMA. These drugs are hallucinogenic amphetamines, which mean they have properties of both hallucinogens and speed.

Hallucinogens work by temporarily "short-circuiting" the way that the brain normally works. They affect the balance of chemicals in the brain involved in relaying thoughts and feelings from one cell to another.

An LSD trip usually lasts 6-8 hours. The effects of the drug are so strange that some people panic. These reactions are so terrifying that many people think they'll never come down from the drug, but they almost always do. Once in a while, though, people don't come back down from LSD. People who don't

come down from LSD in 6 to 10 hours, who continue tripping even days later, are said to have *psychotic reactions* to the drug.

PCP is a unique drug since it fits into several categories at once. It's hallucinogenic, but it's also a downer and an anesthetic. It's like the Certs commercial: "It's three (click), three (click), three drugs in one."

Because of the wide range of effects produced by PCP, it can be a very dangerous drug. Unlike LSD, a person can physically overdose on PCP because it's a downer. Because of its anesthetic properties, people can seriously injure themselves while on PCP and not know it.

PCP is sold under many names in many forms. It can be a tablet, powder, or sprinkled on marijuana or oregano. It's sold as "angel dust," "tic," "tac," "THC," "hog," or any of a number of other names. Since it produces a marijuana-like high when smoked at low doses, it's often sold as "THC," the active ingredient in marijuana. But problems can happen for users who smoke several "dusted" joints and then begin to feel PCP's hallucinogenic and depressant effects.

One thing PCP and LSD have in common is flashbacks. A flashback is a severe panic reaction that happens from time to time in users who have had bad trips before. Usually flashbacks happen when the person is tired or scared or in a similar situation as he was during the bad trip. Flashbacks are scary because they just seem to happen and users think there's nothing they can do about it. They panic, and the fear makes the flashback even worse.

Except for the fact that the person isn't on drugs at all, a flashback is exactly like an ordinary bad trip. If you're ever in a situation with someone in a bad trip or flashback, try to get them to relax and make themselves comfortable. Remind them they're only feeling the effects of a drug and that the effects will soon pass. By just being a friend and caring, you can be the best friend they ever had.

Inhalants

A lot of kids get into inhalants because they're easy to get a hold of. That's too bad. Because in a lot of ways, inhalants could easily fit in that "most dangerous" category we talked about a while ago.

There are three basic types of inhalants: volatile solvents — like glue and gasoline, paint, and paint thinner; aerosols — like Pam® and hairsprays and deodorants; and nitrites. All these chemicals are inhaled, or sniffed, by users, which is one reason they're so dangerous.

Volatile solvents produce effects similar to alcohol. The user acts drunk, slurs his speech, and staggers. The effect usually lasts less than an hour.

Solvents are dangerous in two ways. They pose *immediate* dangers to the user because it's possible to overdose on these chemicals without advance warning. You just go unconscious. And die, sometimes. With other drugs, a person in an overdose gradually loses consciousness over a period of time, but with solvents such as paint or gasoline the effects are immediate. The reason for this is that chemical vapors, when sniffed, go immediately to the brain. These chemicals are not digested by the stomach or filtered and purified by the kidneys or liver. They're just a straight shot from the nose to the brain.

Aerosol sprays pose other dangers to users. These inhalants includes things like hairsprays, deodorants, and Pam®. They contain Freon® or other propellants that produce a very short period of intoxication. The danger here is that the user will sniff too much and coat the tiny air cells of the lungs with hairspray or the other gunk in the can. When this happens, suffocation can result.

Nitrites include chemicals like butyl nitrite and nitrous oxide. Butyl nitrite is sold as "liquid incense" and "room deodorizer." It produces a short, intense high. Nitrous oxide, sometimes called "laughing gas," produces spasms of helpless laughter in users. It is sometimes used by dentists as an anesthetic.

As inhalants go, the nitrites are relatively harmless — especially when compared to volatile solvents and aerosols. But the dangers posed by solvents and aerosols are certainly nothing to sniff at.

Narcotics

A lot of people think all drugs are narcotics, but that isn't true. Narcotics are powerful drugs that relieve pain. They're

used by doctors to stop the terrible kind of pain caused by accidents and surgery.

There are two kinds of narcotics: opiates and synthetics. Opiates are made from the opium poppy. Synthetic narcotics are similar to opiates, but they're made in laboratories from chemicals.

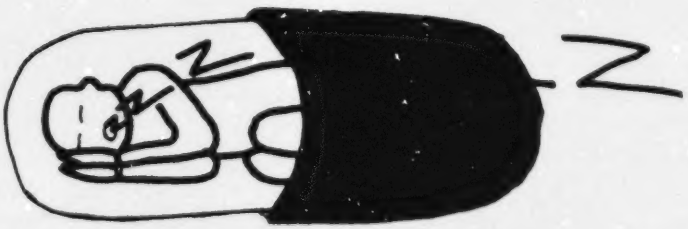
Opium poppies are grown in many parts of the world. Juices from the poppies are extracted and made into a crude gum. This gum is refined into smoking opium or a morphine base. Morphine base can be made into other, more powerful narcotics such as morphine, codeine, and heroin.

Heroin is the most powerful opiate. It is sold as a brown or white powder and is either injected, sniffed, or smoked by users. Heroin produces very strong physical and psychological dependence. Many heroin addicts are so dependent on the drug that they have to shoplift or rob people or commit other crimes every day to support their habits.

Tolerance to heroin is so great that addicts have to constantly use more and more of the drug. Many heroin addicts say that they stay on the drug not so much to get high, but to keep from getting sick during withdrawal.

The synthetic narcotics are much like heroin in their effects. They produce the same kind of high that heroin produces — and the same kind of addiction.

Some of the more popular synthetic narcotics are Demerol®, Dilaudid®, Darvon®, Talwin®, and Percodan®. They usually come in pill form, and can be taken that way or mixed with liquid and shot with a needle.



WHY?

Who, Why, and Why Not

Okay, now that we've talked about the different kinds of drugs, we should say something about the people who take them, and why.

Who are drug users?

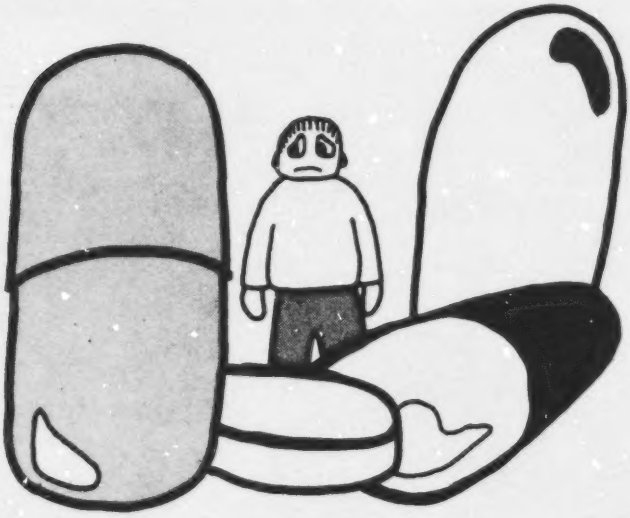
People. Like you and me.

They're not that much different than everybody else. And they're not necessarily bad people. They just have problems they can't solve, or they're poor and they don't have the opportunities to get ahead that other people have. The only thing drug users have in common is that they take drugs. For a lot of different reasons.

One major reason why many people take drugs is that they don't feel good about themselves. They think they're *too* something: too fat, too skinny, too dumb, too smart, too ugly, too pretty (yes, there are even some of those), too short, too tall, too rich (yep, them too), too poor, too young, too old.

Or there's something about themselves that they want to change and they figure drugs are the easiest answer. They

might be nervous in particular situations, and take drugs to relax. Or they might not feel strong or brave enough to do the things they want to do, so they take speed to feel stronger. Or they might be bored with their lives and take LSD just to make life interesting.



Whatever the reason that people begin to take drugs, the reason that they keep on taking them is that they *need* to. Everything we do that releases tension or produces pleasure is addicting in the sense that it makes us want to do it again. This is especially true with drugs. And not just people respond this way. Other animals do, too. When rats in one experiment learned that they could produce a soothing electrical buzz in the pleasure centers of their brains by pressing on a bar, they kept on pressing the bar until they died from exhaustion.

And like the rats with their pleasure bar, people will keep on taking drugs unless someone or something makes them stop. Or they die, like the rats in the experiment. Maybe the worst thing of all about taking drugs is that people have the tendency to withdraw from life, to lay back and just watch. And, although watching the world go by can be a very fine thing to do sometimes, if that's *all* you do, you might have a problem. It's our nature to want to *do*, to make things happen. And in that sense, taking drugs is really against our nature, because when you're high on drugs all you have to *do* is take more drugs. And more drugs. And watch the world go away.

The reasons that people come up with for taking drugs are good enough reasons, really. There's nothing wrong with wanting to relax if you're tense or with wanting to lose weight if you're fat. There's nothing bad about wanting to do things with your friends or wanting people to like you. In fact, those are good reasons for doing almost anything. But the thing that a lot of people forget is that there are other ways to accomplish those goals without drugs.

People who have problems relaxing can learn to meditate or play a guitar or raise goldfish or read a book or bake bread or a thousand other things.

People who want to do things with their friends can do all sorts of things without getting messed up on drugs. They can climb mountains together or play baseball or start a rock and roll band or throw a frisbee or just talk. But they don't *have* to get high to have fun.

One of the big reasons that a lot of kids get high is that it's a group activity and it's just fun to do things together. Passing a joint or planting a tree, activities are usually more fun when they're shared. And a lot of kids mistake the fun of being

together for the feeling of being high. They think the drug caused the feeling, but the feeling was there in the first place. The drug — whatever it might be, pot or acid or speed or whatever — was just along for the ride.

DECIDING

What's it gonna be? You decide.

There are a lot of ways to live your life. Some ways are probably better than others, but there's no sure-fire way to know in advance which decisions are the best ones to make.

As far as taking drugs is concerned, it might be a good idea to think the whole thing over and make a decision before you *have* to. Because when you *have* to, when you're with some kids after school or at a party and somebody whips out a joint or some pills or something, it might be too late. Because if you haven't really thought much about whether you want to take drugs or not, you might just find that it's easier to go along with everyone else, "just to see what it's like." Then the decision's made for you.

Why not think about the things we've talked about in this booklet and make your decision — before you *have* to make one. At least then you'll be sure when you decide that *you* decided rather than let somebody else decide for you.

It's a big decision. But you can handle it.

Take some time, and think about it. You're busy, but you're not *that* busy.

Are you?

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